(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
Special instructions	to Filing Onicer.	

Office Use Only



000287673660

07/12/16--01017--008 **35.00

OloRes

JUL 19 2016

R. WHITE



3 JUL 12 AH 11:53

TRANSMITTAL LETTER

Division of Corporations SUBJECT: Zumidian Corporation (Name of Corporation) DOCUMENT NUMBER: F15000002295 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alexia Vallord-Costa (Name of Person) **Zumidian Corporation** (Name of Firm/Company) 6407 SW 35th Street (Address) Miami, FL 33155 (City/State and Zip Code) For further information concerning this matter, please call: Robert F. Cooke, Esq.

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee. FL 32314

TO:

Amendment Section

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Alexia Vallord-Cos	ta hereby resign as VP/T/VC
-7	(Title)
_{of} Zumidian Corporat	ion
(Name	e of Corporation)
F15000002295 (Document Number, if known)	, a corporation organized under the laws of the State of
Delaware	

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314